



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION IV

345 COURTLAND STREET
ATLANTA, GEORGIA 30365

MAY 8 1984

4AW-RM

Mr. Norman Stevenson
Scott Paper Company
Southern Operations
P.O. Box 2447
Mobile, Alabama 36652

Re: Request for Withdrawal of EPA Hazardous Waste Application
EPA I.D. No. ALD 008 149 858

Dear Mr. Stevenson:

This agency has been notified by the Hazardous Waste Agency of the State in which your facility is located, that your request for withdrawal of your Part A application has been granted.

Based on that information, EPA is closing our Part A file on your facility. Your EPA identification number will be retained in our data management system so that in the future, should the need arise, an EPA identification number will be available to you.

The RCRA Hazardous Waste Regulations (40 CFR §265.112) require that an owner or operator of a hazardous waste facility submit his closure plan to the Director of the State Hazardous Waste Agency within 15 days after the termination of interim status. This is the first step in the initiation of closure procedures required under 40 CFR §§265.110 to 265.120. Each of the states in Region IV of EPA has substantially equivalent state regulations. By copy of this letter, we are notifying the State Hazardous Waste Agency that all regulatory requirements for closure of your hazardous waste facility should be met and documented in their files.

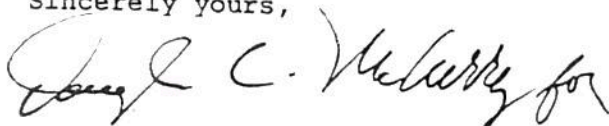
If your facility is a generator which will continue to accumulate hazardous waste for short periods of time (less than 90 days) prior to shipment off site, you should be aware of the hazardous waste regulations which apply to generators who accumulate hazardous waste. In the Federal program these regulations are found in 40 CFR §262.34.

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If there are any questions concerning this, please contact Nell Keever of my staff at the above address or by phone at (404) 881-3446.

Sincerely yours,

A handwritten signature in dark ink, appearing to read "James H. Scarbrough". The signature is fluid and cursive, with the first name "James" being more prominent and the last name "Scarbrough" written in a continuous script.

James H. Scarbrough, Chief
Residuals Management Branch
Air & Waste Management Division

cc: Alabama Department of Environmental Management

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Already with Schawn
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File in
Inactive
Part A File

June 8, 1984

Mr. James H. Scarbrough, Chief
Residual Management Branch
Air and Waste Management Division
U. S. EPA Region IV
345 Courtland Street
Atlanta, GA 30365

Re: Withdrawal of EPA Hazardous Waste Application
EPA ID No. ALDO08149858

Dear Mr. Scarbrough:

We are in receipt of your letter dated May 8, 1984, suggesting that the hazardous waste storage facility at our Mobile Plant be closed since we have withdrawn our Part A Application. The Hazardous Waste Storage Facility at this site was established as a protective measure since we were not sure of the amount of time it would take for us to dispose of the small amounts of hazardous waste generated once these wastes had been generated. Since its establishment, we have never stored hazardous wastes for greater than 90 days. Therefore, this area has functioned as a hazardous waste accumulation area pursuant to 40 CFR 262.34(a), even though it had interim status as a hazardous waste storage area. The difference is not in the physical area but whether or not storage exceeds 90 days.

We are continuing to utilize the area as a hazardous waste accumulation area pursuant to 40 CFR 262.34(a). Procedures are now in effect to insure that any hazardous waste generated is properly disposed of within the 90 day accumulation period allowed for in the regulations. We do not anticipate any need to store hazardous waste for greater than 90 days, and accordingly, we decided to withdraw our application for a hazardous waste storage license for this area. Because hazardous wastes were not stored for greater than 90 days in the area, we believe that the area was never physically opened as a Hazardous Waste Storage Area and, therefore, its status will automatically revert to a Hazardous Waste Accumulation Area under 40 CFR 252.34(a). As such, we see no need to file or implement a closure plan for this facility.

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June 8, 1984

If you have any questions regarding this matter, please feel free to call us.

Sincerely,

Norman Stevenson

Norman W. Stevenson
Manager-Environmental Services

NWS : mh

cc: Mr. Bernard E. Cox, Jr.-ADEM

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4 13 201 + 2 35.8

*Send Form
Letter # 1*
SCOTT

August 16, 1983

Mr. James H. Scarborough
Residuals Management Branch
EPA Region IV
345 Courtland Street, N.E.
Atlanta, GA 30308

Re: RCRA Part A Permit Application
EPA ID No. ALD008149858

Dear Mr. Scarborough:

Referenced Part A of the RCRA Permit Application for a hazardous waste storage facility was submitted in November of 1980. We submitted this application because we were unsure of our ability to dispose of generated hazardous wastes within the 90 day accumulation time period allowed. We recently reviewed our hazardous waste management history along with recent promulgated clarification to the regulations. We now feel more confident that we would be able to successfully dispose of any hazardous waste generated at the Mobile Plant within the 90 day accumulation time period allowed in the regulations. We are, therefore, withdrawing from active consideration our application for a hazardous waste storage area.

Sincerely,

James T. Lienesch

James T. Lienesch
Vice President
Southern Operations

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cc: Mr. Bernard E. Cox, Jr.
ADEM - Land Division
State Capital, AL 36130

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ALD008149858

SEP 1 9 43 83

48W-FM

Mr. James T. Lienesch
Vice President
Southern Operations
Scott Paper Company
P. O. Box 2447
Mobile, Alabama 36652

Re: Request for Withdrawal of EPA Hazardous Waste Application
EPA I.D. Number ALD 606 149 858

Dear Mr. Lienesch:

This letter is to acknowledge receipt of your request for withdrawal of your application for a permit under the Resource Conservation and Recovery Act (RCRA), as amended. Your letter indicated that you no longer treat, store, or dispose of hazardous waste, in a manner requiring Interim Status or submission of a RCRA permit application.

Withdrawal of your permit application constitutes revocation of interim status, as defined by §3005(e) of the Act. Consequently, under the Federal program, you would no longer be allowed to treat, store, or dispose of hazardous waste, except as provided for in §261 and §262. However, as you are probably aware, the State has been authorized to implement certain requirements of the program in lieu of the Federal regulatory requirements. Therefore, withdrawal of your application also directly affects the State program.

In light of the foregoing, EPA plans to proceed as follows. EPA will place your file in our "suspense" file. This action, in essence, revokes your interim status under the Federal program. However, we will forward^o the request to the State for formal action. The State will contact you if further information relating to your request is required. If the State agrees that you do not need a RCRA permit, they will notify you of this determination, and by carbon copy of this notification sent to EPA, your application will be formally withdrawn, and your file will be inactivated.

The RCRA Hazardous Waste Regulations (40 CFR 265.112) require that an owner or operator of a hazardous waste facility submit his closure plan to the Director of the State Hazardous Waste Agency within 15 days after the termination of interim status. This is the first step in the initiation of closure procedures required under 40 CFR §§265.110 to 265.120. Each of the states in Region IV of EPA has substantially equivalent state

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regulations. By copy of this letter we are notifying the State Hazardous Waste Agency that all regulatory requirements for closure of your hazardous waste facility should be met and documented in their files.

If your facility is a generator who will continue to accumulate hazardous waste for short periods of time (less than 90 days) prior to shipment off site you should be aware of the hazardous waste regulations which apply to generators who accumulate hazardous waste. In the Federal program these regulations are found in 40 CFR §262.34.

In conclusion, this letter should not be construed as EPA's concurrence with your determination that RCRA regulatory requirements are not applicable to your facility. Furthermore, this letter does not relieve you of your responsibility to comply with State and local hazardous waste regulatory requirements.

Finally, your request to withdraw interim status means that you may not treat, store, or dispose of hazardous waste without a permit issued under the authority of §3005 of the Act and 40 CFR Part 264.

If you wish to reconsider this withdrawal request, please advise this office and the State within the next ten days. You should be receiving a formal response to your request from the State in the near future.

If you require further clarification, please contact Doug McCurry of the Waste Engineering Section (404) 831-3433 or a representative of the State Hazardous Waste Program.

Sincerely yours,

James H. Scarbrough, Chief
Residuals Management Branch
Air & Waste Management Division

cc: Alabama Department of Environmental Management

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RECEIVED
EPA/REGION IV

August 4, 1981

Certified Mail
Return Receipt Requested

AUG 7 11 20 AM '81

ENCLOSURE

Mr. John M. Harvanek, III
RCRA Project Officer
U.S. EPA, Region IV
345 Courtland Street
Atlanta, Georgia 30308

Re: Application for Hazardous Waste Permit
EPA I.D. No. AL D008149858

Dear Mr. Harvanek:

In response to your letter to our Mr. Eugene Johnson received on July 27, 1981, Mr. Maurice M. Caron of our Corporate Staff contacted your Mr. Robert M. Tallini on August 4, 1981 to obtain clarification of the allegedly missing items in Part A of the RCRA Permit Application for our Mobile Plant. It is our understanding that the zero (0) value for some of the "Estimated Annual Quantity of Waste" generated in Part IV of Form 3 will not be accepted by the computer program used to catalogue the applications.

A zero (0) value for some of the listed wastes was used due to the fact that these products are utilized as raw materials at this plant. As such, it is not expected that these would ever be wasted; however, they were registered in the unlikely event that they would become wasted due to circumstances beyond our control. In view of the fact that your computer program cannot accept a zero (0) value, we are voluntarily changing the estimated annual quantity of waste generated to one (1) pound for all material listed in the original application at a zero (0) estimated waste generation level with the understanding that we do not anticipate generating this level of waste on a routine basis.

We trust that this will resolve the problem with our initial Part A application and that this application can now be considered complete. Please advise me as soon as possible if you need any further clarifications.

Sincerely,



N. W. Stevenson
Manager of Environmental Resources

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NWS:sw
Attachment

SCOTT

August 14, 1980

U. S. EPA Region IV
RCRA Activities
345 Courtland, N.E.
Atlanta, Georgia 30308

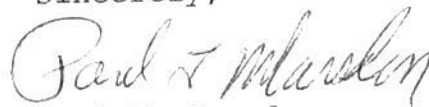
Gentlemen:

Enclosed are completed "Notification of Hazardous Waste Activity" (EPA Form 8700-12) for the various installations noted on the attached list which are part of Scott Paper Company Southern Operations. These notifications are being sent pursuant to Section 3010 of the Resource Conservation and Recovery Act of 1976 and 40 CFR, Parts 262 through 265.

It is noted that the notification for the Mobile Plant in particular includes products used at this facility as raw materials. Although these raw materials are not "waste", it is conceivable that some could become a waste due to circumstances beyond our control. We have also checked Section VI (C) of the Form in order to protect ourselves in the unlikely event that we have to accumulate wastes for more than 90 days because of circumstances beyond our control.

The Act and the regulations implementing the Act do not address themselves to "potential" wastes or to wastes generated or accumulated due to circumstances beyond a facility's control. It is recommended that EPA modify the language in the regulation or issue a Regulation Interpretation Memoranda (RIM) or Technical Amendments to the Regulations (TAR) to address the situation of wastes generated or accumulated because of circumstances beyond a facility's control so that such a situation will not subject a facility to criminal and civil liability for a violation of the Act. This facility may remove certain wastes listed from the "Notification" should this change be made.

Sincerely,



Paul F. Marsden
Vice President
Southern Operations

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Attachments

SCOTT PAPER COMPANY
P. O. BOX 2447
MOBILE, ALABAMA 36652

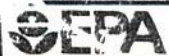
"Notification of Hazardous Waste Activity"
Being Submitted for the Following Installations:

<u>INSTALLATION</u>	<u>INSTALLATION'S EPA I.D. NUMBER</u>
Scott Paper Company - Mobile	
Scott - Mobile River Sawmill Division	ALD034063768
Scott - Monroeville Maintenance Shop	
Scott - Clara Maintenance Shop	
Scott - Pine Hill Maintenance Shop	
Scott - Wild Fork Research Area	
Scott - Mississippi Research Area	
Scott - Huxford Shed	
Scott - Jackson Office	

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ALD034063768



U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

INSTALLATION'S EPA I.D. NO.
I. NAME OF INSTALLATION
II. INSTALLATION MAILING ADDRESS
III. LOCATION OF INSTALLATION

Scott Paper Company
P. O. Box 2447
Mobile, Alabama 36652

PLEASE PLACE LABEL IN THIS SPACE

Mobile, Alabama

FOR OFFICIAL USE ONLY

COMMENTS

DIVISION

INSTALLATION'S EPA I.D. NUMBER
APPROVED
DATE RECEIVED (yr., mo., & day)

I. NAME OF INSTALLATION

SCOTT PAPER COMPANY

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

3 PO BOX 2447

CITY OR TOWN

ST.

ZIP CODE

4 MOBILE

AL

36652

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

5 BAY BRIDGE ROAD

CITY OR TOWN

ST.

ZIP CODE

6 MOBILE

AL

36652

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

PHONE NO. (area code & no.)

2 JOHNSON EUGENE B MGR FUT PLAN

205-456-9060

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

8 SCOTT PAPER COMPANY

B. TYPE OF OWNERSHIP (enter the appropriate letter into box)

F = FEDERAL
M = NON-FEDERAL

M

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

☒ A. GENERATION

☒ B. TRANSPORTATION (complete item VII)

☒ C. TREAT/STORE/DISPOSE

☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR

☐ B. RAIL

☒ C. HIGHWAY

☐ D. WATER

☐ E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

☒ A. FIRST NOTIFICATION

☐ B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

000003

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

5	W	A	L	0	0	8	1	4	9	8	5	8	2	1
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 F 0 0 1 23 - 26	2 F 0 0 2 23 - 26	3 F 0 0 5 23 - 26	4 23 - 26	5 23 - 26	6 23 - 26
7 23 - 26	8 23 - 26	9 23 - 26	10 23 - 26	11 23 - 26	12 23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13 23 - 26	14 23 - 26	15 23 - 26	16 23 - 26	17 23 - 26	18 23 - 26
19 23 - 26	20 23 - 26	21 23 - 26	22 23 - 26	23 23 - 26	24 23 - 26
25 23 - 26	26 23 - 26	27 23 - 26	28 23 - 26	29 23 - 26	30 23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31 U 0 1 3 23 - 26	32 U 1 2 2 23 - 26	33 U 1 3 3 23 - 26	34 U 2 3 9 23 - 26	35 U 0 0 2 23 - 26	36 U 2 2 0 23 - 26
37 U 1 2 3 23 - 26	38 P 1 0 5 23 - 26	39 P 0 3 5 23 - 26	40 P 0 4 4 23 - 26	41 U 0 1 9 23 - 26	42 U 1 5 4 23 - 26
43 U 1 5 9 23 - 26	44 U 1 8 8 23 - 26	45 P 0 9 8 23 - 26	46 23 - 26	47 23 - 26	48 23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49 23 - 26	50 23 - 26	51 23 - 26	52 23 - 26	53 23 - 26	54 23 - 26
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E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☒ 1. IGNITABLE
(D001)

☒ 2. CORROSIVE
(D002)

☒ 3. REACTIVE
(D003)

☒ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

NAME & OFFICIAL TITLE (type or print)

DATE SIGNED

Paul F. Marsden
Vice President Southern Operations
Mobile, Alabama

8/14/80

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SCOTT

September 19, 1980

ALA 008149858

Mr. Robert Tallini
EPA Region IV
RCRA Activities
345 Courtland, N. E.
Atlanta, GA 30308

Dear Mr. Tallini:

This will confirm our telephone conversations yesterday during which we agreed on the information, noted below, for our Notification of Hazardous Activity" already submitted to you on August 14, 1980.

Scott-Monroeville Maintenance Shop

- . VI. C Eliminate as "Treat/Store/Dispose"

Mobile River Sawmill Division-Scott Paper Co.

- . VI. C Eliminate as a "Treat/Store/Dispose"

Scott-Clara Maintenance Shop

- . III. 5 Location: Add "On Clara-Chicora Rd. "
- . VI. C Eliminate as "Treat/Store/Dispose"

Scott-Pine Hill Maintenance Shop

- . III. 5 Location: Add "1 Mile East of AL 10 & 5 Jct. "
- . VI. C Eliminate as "Treat/Store/Dispose"

Scott-Huxford Shed

- . III. 5 Location: Add "1 Mile East of AL21"

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Scott-Jackson Office

- . III. 5 Location: Change from "Route 1"
To "10 Miles South of Opp on US 331"

Scott Paper Co., Mobile

- . IX. A Add: "F 002 and F 005"

ALL AL202 100053
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continued

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Mr. Robert Tallini
EPA Region IV

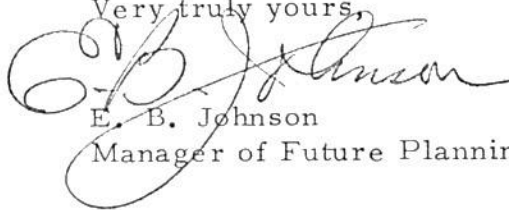
-2-

9/19/80

We noted that Scott Paper Co., Mobile had not received our Part A packet (Form 1 and Form 3 of the Consolidated Permits Application) and requested that you forward it to us.

If there is any further question about these changes and additions, please call me.

Very truly yours,



E. B. Johnson
Manager of Future Planning

EBJ/gorc

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ROBERT E. RODGERS
Senior Vice President - Operations
Packaged Products Division

November 14, 1980

U.S. Environmental Protection Agency
Region IV
RCRA Activities
345 Courtland, N.E.
Atlanta, GA 30308

Gentlemen:

Attached is the completed Hazardous Waste Permit Application - Part A for the Mobile Plant of Scott Paper Company. This application is being submitted pursuant to Section 3005 of the Resource Conservation and Recovery Act of 1976, and 40 CFR Parts 122 and 265.

It is noted that in Form 3, Section IV, "Description of Hazardous Waste", some of the annual quantities of wastes have been estimated as zero. This is due to the fact that these products are utilized as raw materials at this plant. As such, it is not expected that these would ever be wasted; however, they are being registered in the unlikely event that they would become wasted due to circumstances beyond our control.

As stated in our original notification, the Act and the regulations implementing the Act do not address themselves to "potential" wastes or to wastes generated or accumulated due to circumstances beyond a facility's control. It is recommended that EPA modify the language in the regulation or issue a Regulation Interpretation Memoranda (RIM) or Technical Amendment to the Regulations (TAR) to address the situation of wastes generated or accumulated because of circumstances beyond a facility's control so that such a situation will not subject a facility to criminal and civil liability for a violation of the Act. This facility may remove certain wastes listed from the "Notification" and "License Application" should this change be made.

Sincerely, 0000001

Robert E. Rodgers
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Attachment

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FORM 1 GENERAL		ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION <i>Consolidated Permits Program</i> <i>(Read the "General Instructions" before starting.)</i>	I. EPA I.D. NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;"> F A L D 0 0 8 1 4 9 8 5 8 3 D </div>
LABEL ITEMS <div style="border: 1px solid black; padding: 5px;"> I. EPA I.D. NUMBER III. FACILITY NAME V. FACILITY MAILING ADDRESS VI. FACILITY LOCATION </div>		<div style="border: 1px solid black; padding: 10px; width: fit-content; margin: auto;"> 001511 RECEIVED PLEASE PLACE LABEL IN THIS SPACE NOV 19 3 03 PM '80 ENFORCEMENT </div>	

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X	See Note (1)	B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X			D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		X	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1	SKIP	Scott Paper Company
---	------	---------------------

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2 Johnson Eugene Mgr Future Plan	205 456 9060

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX			
3 P.O. Box 2447			
B. CITY OR TOWN		C. STATE	D. ZIP CODE
4 Mobile		AL	36652

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER			
5 Bay Bridge Road			
B. COUNTY NAME			
Mobile			
C. CITY OR TOWN		D. STATE	E. ZIP CODE
6 Mobile		AL	36614
F. COUNTY CODE (if known)			

AL008149858

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VIII. OPERATOR INFORMATION

F. CITY OR TOWN										G. STATE		H. ZIP CODE		IX. INDIAN LAND	
Philadelphia										PA		19113		Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
15	16							40	41	42	43	44	45	46	47

X. EXISTING ENVIRONMENTAL PERMITS																																	
A. NPDES (Discharges to Surface Water)										D. PSD (Air Emissions from Proposed Sources)																							
C	T	I								C	T	I																					
9	N		A	L	0	0	0	2	8	0	1							9	P		S	e	e	N	o	t	e	#	2				
15	16	17	18	-							30	15	16	17	18	-					30												
B. UIC (Underground Injection of Fluids)										E. OTHER (specify)																							
C	T	I								C	T	I																					
9	U									9																							
15	16	17	18	-							30	15	16	17	18	-					30												
C. RCRA (Hazardous Wastes)										E. OTHER (specify)																							
C	T	I								C	T	I																					
9	R									9																							
15	16	17	18	-							30	15	16	17	18	-					30												

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

- 1) Kraft Pulp Manufacture
- 2) Coating and Uncoated Fine Paper Manufacture
- 3) Tissue and Toweling Paper Manufacture
- 4) Converting of papers manufactured in 2) and 3) above

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE <i>(type or print)</i> Robert E. Rodgers, Jr., Senior Vice President- Operations	B. SIGNATURE 	C. DATE SIGNED 11.14.80
--	---	-----------------------------------

COMMENTS FOR OFFICIAL USE ONLY

FORM 3 RCRA
EPA
HAZARDOUS WASTE PERMIT APPLICATION
Consolidated Permits Program
(This information is required under Section 3005 of RCRA.)

I. EPA I.D. NUMBER
F A L D 0 0 8 1 4 9 8 5 8 3 1

FOR OFFICIAL USE ONLY

APPLICATION APPROVED DATE RECEIVED (yr., mo., & day)

COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)

☒ 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)

☐ 2. NEW FACILITY (Complete item below.)

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

B. REVISED APPLICATION (place an "X" below and complete Item I above)

☐ 1. FACILITY HAS INTERIM STATUS

☐ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.

1. AMOUNT - Enter the amount.

2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PRO-CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS	OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER HOUR OR LITERS PER HOUR
Disposal:					
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			
UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE CODE
GALLONS	G	LITERS PER DAY	ACRE-FEET	A	
LITERS	L	TONS PER HOUR	HECTARE-METER	F	
CUBIC YARDS	Y	METRIC TONS PER HOUR	ACRES	B	
CUBIC METERS	C	GALLONS PER HOUR	HECTARES	Q	
GALLONS PER DAY	U	LITERS PER HOUR			

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PRO-CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY
		1. AMOUNT (specify)	2. UNIT OF MEASURE (enter code)			1. AMOUNT	2. UNIT OF MEASURE (enter code)
X-1	S 0 2	600	G	5			
X-2	T 0 3	20	E	6			
1	S 0 1	4000	G	7			
2				8			
3				9			
4				10			

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE
POUNDS P
TONS T

METRIC UNIT OF MEASURE CODE
KILOGRAMS K
METRIC TONS M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.

2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.

3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

WASTE NO. (enter code)	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

NOTE: Photocopy this page before completing

if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)

FOR OFFICIAL USE ONLY

W A L D 0 0 8 1 4 9 8 5 8 3 1

W

DUP

T/A/C

2

DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	D 0 0 9	1	P	S 0 1	
2	D 0 1 0	1	P	S 0 1	
3	D 0 1 1	1	P	S 0 1	
4	D 0 1 2	1	P	S 0 1	
5	D 0 1 3	1	P	S 0 1	
6	D 0 1 4	1	P	S 0 1	
7	D 0 1 5	1	P	S 0 1	
8	D 0 1 6	1	P	S 0 1	
9	D 0 1 7	1	P	S 0 1	
10	P 0 9 0	1	P	S 0 1	
11	U 2 1 0	1	P	S 0 1	
12	U 1 4 7	1	P	S 0 1	
13	U 0 5 4	1	P	S 0 1	
14	U 0 5 7	1	P	S 0 1	
15	U 2 2 6	1	P	S 0 1	
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					

000004

22-4107358

NOT

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)**E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.**

EPA I.D. NO. (enter from page 1)

5	F	A	L	D	0	0	8	1	4	9	8	5	8	3	6
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

LONGITUDE (degrees, minutes, & seconds)

3	0	4	4	0	0	2
65	66	67	68	69	70	71

0	8	8	0	3	0	0	0
72	73	74	75	76	77	78	79

VIII. FACILITY OWNER

- ☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

Robert E. Rodgers, Jr., Senior
Vice President - Operations

B. SIGNATURE

Robert E. Rodgers

C. DATE SIGNED

11.14.80

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

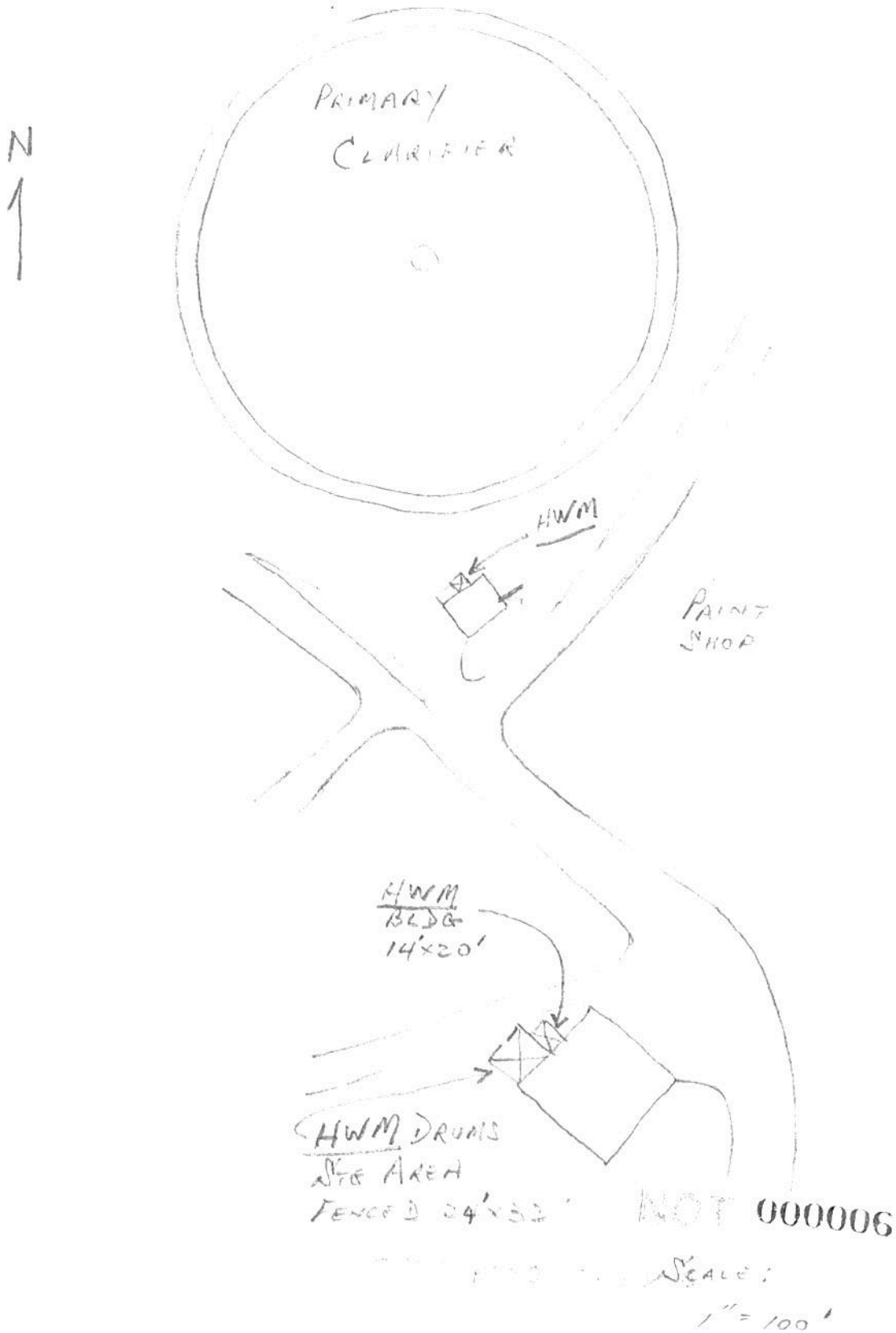
B. SIGNATURE

C. DATE SIGNED

NOTE: Photocopy this page before completing. You have more than 26 wastes to list.

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY														
W A L D 0 0 8 1 4 9 8 5 8 3 1													W DUP 2 DUP														
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																											
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES																							
				1. PROCESS CODES (enter)																							
				27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50
1	F 0 0 1	10,000	P	S	0	1																					
2	P 0 3 5	1	P	S	0	1																					
3	P 0 4 4	1	P	S	0	1																					
4	P 0 9 8	1	P	S	0	1																					
5	P 1 0 5	1	P	S	0	1																					
6	U 0 0 2	1	P	S	0	1																					
7	U 0 1 3	100	P	S	0	1																					
8	U 0 1 9	1	P	S	0	1																					
9	U 1 2 2	1	P	S	0	1																					
10	U 1 2 3	1	P	S	0	1																					
11	U 1 3 3	1	P	S	0	1																					
12	U 1 5 4	1	P	S	0	1																					
13	U 1 5 9	1	P	S	0	1																					
14	U 1 8 8	1	P	S	0	1																					
15	U 2 2 0	1	P	S	0	1																					
16	U 2 3 9	1	P	S	0	1																					
17	D 0 0 1	20,000	P	S	0	1																					
18	D 0 0 2	1	P	S	0	1																					
19	D 0 0 3	135	T	S	0	1																					
20	F 0 0 2	1	P	S	0	1																					
21	F 0 0 5	7,000	P	S	0	1																					
22	D 0 0 4	1	P	S	0	1																					
23	D 0 0 5	1	P	S	0	1																					
24	D 0 0 6	1	P	S	0	1																					
25	D 0 0 7	1	P	S	0	1																					
26	D 0 0 8	1	P	S	0	1																					

V. FACILITY DRAWING (see page 4)



Note #1 - Title

Title to the most recent additions to the Waste Treatment Facilities is in the name of the Industrial Development Board of Mobile, Alabama until the bonds issued to finance the additions are retired by Scott Paper Company.

Note #2

PSD Application filed on May 21, 1980. The following numbers have been assigned to various processes:

503-2013-X031	Power Boiler
503-2012-X032	Recovery Boiler
503-2012-X003	Smelt Tank
503-2012-X034	Evaporators
503-2012-X035	Coal Yard

0000067

NOT

64033149858

Note # 3

Alabama Permit Numbers

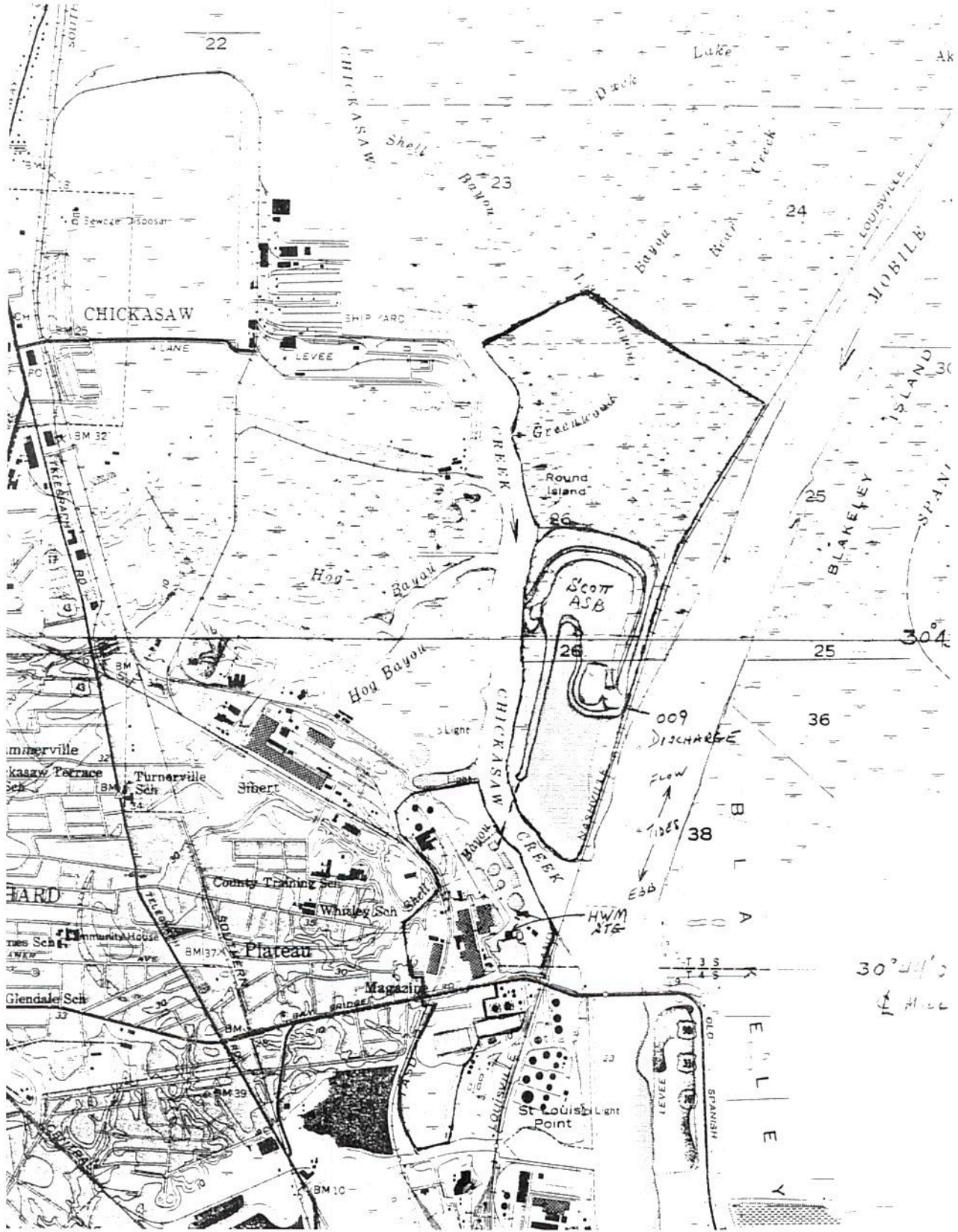
Description of Source(s)

503-2012-0001	Chemical Recovery Furnace #3 With Electrostatic Precipitator
503-2012-0002	Chemical Recovery Furnace #4 With Electrostatic Precipitator
503-2012-0003	Chemical Recovery Furnace #5 With Electrostatic Precipitator
503-2012-0004	Chemical Recovery Furnace #6 With an Environmental Elements, Inc. Electrostatic Precipitator
503-2012-0005	Dissolving Tank Vent No. 3
503-2012-0006	Dissolving Tank Vent No. 4
503-2012-0007	Dissolving Tank Vent No. 5
503-2012-0008	Dissolving Tank Vent No. 6 with Wet Scrubber
503-2012-0009	Lime Kiln #1 with Wet Scrubber
503-2012-0010	Lime Kiln #2 with Wet Scrubber
503-2012-0011	Lime Kiln #3 with Wet Scrubber
503-2012-0012	Lime Kiln #4 with Wet Scrubber
503-2012-0013	Multi-Effect Evaporator Sets 1-4 and Total Reduced Sulfur Gases Emission Control System
503-2012-0014	Fourteen (14) Batch Digesters, Three (3) Rejects Digesters and One (1) Continuous Digester with Total Reduced Sulfur Gases Collection and Incineration System
503-2012-0015	Combination of Power Boiler #1, #2, and #3 - Rated Capacity 112.5 million BTU/hr. each
503-2012-0016	#4 Power Boiler with Multiclone - Rated Capacity 112.5 million BTU/hr.
503-2012-0017	#5 Power Boiler - Rated Capacity 205 million BTU/hr.

000008

NOT

12003109538



SCOTT

November 17, 1980

ALA 008 149 858

U.S. Environmental Protection Agency
Region IV
RCRA Activities
345 Courtland, N. E.
Atlanta, Georgia 30308

Gentlemen:

The attached subsequent "Notification of Hazardous Waste Activity" is being submitted to add some materials inadvertently omitted in the original notification. All other portions of the notification remain unchanged.

Sincerely,



Paul F. Marsden
Vice President
Southern Operations

SW
Attachment

000001

NOT

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED



U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

Form Approved OMB No. 158-S79016
ISA No. 0246-EPA-OT

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

PLEASE PLACE LABEL IN THIS SPACE
EPA REGION IV

001487

NOV 13 2 45 PM '86

FOR OFFICIAL USE ONLY

COMMENTS

INSTALLATION'S EPA I.D. NUMBER

APPROVED

DATE RECEIVED
(yr., mo., & day)

FALD008149858

I. NAME OF INSTALLATION

Scott Paper Company

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

3 P O Box 2447

CITY OR TOWN

4 Mobile

ST.

ZIP CODE

AL

36652

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

5 Bay Ridge Road

CITY OR TOWN

6 Mobile

ST.

ZIP CODE

AL

36652

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

2 Johnson Eugene Mgr Future Plan

PHONE NO. (area code & no.)

205-456-9060

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

8 Scott Paper Company

B. TYPE OF OWNERSHIP
(enter the appropriate letter into box)

F = FEDERAL
M = NON-FEDERAL

M

☒ A. GENERATION

☒ B. TRANSPORTATION (complete item VII)

☒ C. TREAT/STORE/DISPOSE

☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR

☐ B. RAIL

☒ C. HIGHWAY

☐ D. WATER

☐ E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

☐ A. FIRST NOTIFICATION

☒ B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

000002

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

[illegible]

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
F 0 0 2	F 0 0 5				
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance or waste stream from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

C. OTHER HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance or waste stream you handle that does not fit into one of the categories above.

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

[illegible]

U 1 4 7	U 2 2 6		23 - 26	23 - 26	23 - 26
D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.					
			52	53	54

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49				50				51				52				53				54			
23 - 26				23 - 26				23 - 26				23 - 26				23 - 26				23 - 26			

UNLISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☐ 3. REACTIVE ☐ 4. TOXIC

☐ 1. IGNITABLE
(D001)

☐ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☐ 4. TOXIC
(D000)

X. CERTIFICATION

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

NAME & OFFICIAL TITLE (type or print)	DATE SIGNED

I believe that the submitted information is true and correct, and I am not providing any information, including the possibility of fine and imprisonment.		
SIGNATURE <i>Paul F. Marsden</i>	NAME & OFFICIAL TITLE (type or print) Paul F. Marsden, Vice President, Southern Operations	DATE SIGNED 11/17/80

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

INDUSTRIAL NARRATIVE SHEET

1. Site Identification:

Site number: ALD981754724

Site name: Scott Paper Company Landfill

Site county: Mobile County

2. Industrial Narrative Summary:

Company Name: Scott Paper Company Landfill

Address: P. O. Box 2447
Mobile, AL 36601

Telephone No.: (205) 456-9060

Contact: Mr. Fred Bedsole

Discussion: On October 28, 1979, a 10,000 gallon storage tank ruptured and 200 gallons of Styrene Butadiene entered Chickasaw Creek. The clean-up material from the ditch was taken to Scott storage area at the end of Herbert Street. This storage area was formerly a landfill which contained paper, broke cores, scrap wire, pallets and miscellaneous waste. This material was removed and sent to an approved landfill.

Styrene Butadiene (Dow 620 Latex) was used in the process to make paper goods such as paper towels, toilet paper, and facial tissue. After polymerization occurs, the material is not toxic.

3. Disposition: *This PA covers site #1 covered in Harold Taylors memo of Feb 12, 1982*

4. Comments: *Fred Bedsole stated during phone call that they had not placed any hazardous waste at the site. There are no surface or ground water supplies in the 5 miles of this site*



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
A10 981 754 724

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) SCOTT PAPER COMPANY		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER			
03 CITY mobile	04 STATE A1A	05 ZIP CODE 36601	06 COUNTY Mobile	07 COUNTY CODE 097	08 CONG DIST 1
09 COORDINATES LATITUDE		LONGITUDE			
10 DIRECTIONS TO SITE (Starting from nearest public road)					

III. RESPONSIBLE PARTIES

01 OWNER (if known) SCOTT PAPER COMPANY		02 STREET (Business, mailing, residential) P.O. BOX 2447			
03 CITY mobile	04 STATE A1A	05 ZIP CODE 36601	06 TELEPHONE NUMBER (205) 4569060		
07 OPERATOR (if known and different from owner) Same		08 STREET (Business, mailing, residential)			
09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER ()		
13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: (Specify) <input type="checkbox"/> G. UNKNOWN					
14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply) <input type="checkbox"/> A. RCRA 3001 DATE RECEIVED: / / <input type="checkbox"/> B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: / / <input type="checkbox"/> C. NONE					

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES DATE 5/16/87 <input type="checkbox"/> NO		BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input checked="" type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: (Specify) CONTRACTOR NAME(S):			
02 SITE STATUS (Check one) <input type="checkbox"/> A. ACTIVE <input checked="" type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN		03 YEARS OF OPERATION BEGINNING YEAR ENDING YEAR 1972 UNKNOWN			
04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED SITE CONSISTED MAINLY OF PLOD CHIPS SAND TOSS ETC. STYRENE BUTADIENE & SOIL, WAS LACED IN THE LANDFILL WHEN SPILL WAS CLEANUP. ALL MATERIAL WAS REMOVED AND Hauled TO AN APPROVED LANDFILL.					
05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION					

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one if high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incident(s)) <input type="checkbox"/> A. HIGH (Inspection required promptly) <input type="checkbox"/> B. MEDIUM (Inspection required) <input type="checkbox"/> C. LOW (Inspect on time available basis) <input checked="" type="checkbox"/> D. NONE (No further action needed, complete current disposition form)			
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VI. INFORMATION AVAILABLE FROM

01 CONTACT Fred Bedsole	02 OF (Agency/Organization) SCOTT PAPER		03 TELEPHONE NUMBER (205) 4569060	
04 PERSON RESPONSIBLE FOR ASSESSMENT J.E. Downey	05 AGENCY ADEA	06 ORGANIZATION LAND	07 TELEPHONE NUMBER (205) 271-7743	08 DATE 5/15/87 MONTH DAY YEAR

II. WASTE STATES, QUANTITIES, AND CHARACTERISTICS

01 PHYSICAL STATES (Check all that apply)	02 WASTE QUANTITY AT SITE <i>(Measures of waste quantities must be independent)</i>	03 WASTE CHARACTERISTICS (Check all that apply)
<input type="checkbox"/> A SOLID <input type="checkbox"/> B POWDER, FINES <input checked="" type="checkbox"/> C SLUDGE <input type="checkbox"/> D OTHER _____ (Specify)	<input type="checkbox"/> E SLURRY <input type="checkbox"/> F LIQUID <input type="checkbox"/> G GAS TONS <u>NONE</u> CUBIC YARDS _____ NO OF DRUMS _____	<input type="checkbox"/> A TOXIC <input type="checkbox"/> B CORROSIVE <input type="checkbox"/> C RADIOACTIVE <input type="checkbox"/> D PERSISTENT <input type="checkbox"/> E SOLUBLE <input type="checkbox"/> F INFECTIOUS <input type="checkbox"/> G FLAMMABLE <input type="checkbox"/> H IGNITABLE <input type="checkbox"/> I HIGHLY VOLATILE <input type="checkbox"/> J EXPLOSIVE <input type="checkbox"/> K REACTIVE <input type="checkbox"/> L INCOMPATIBLE <input type="checkbox"/> M NOT APPLICABLE

III. WASTE TYPE

CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE			
OLW	OILY WASTE			
SOL	SOLVENTS	N/A		
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS			
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS			

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

[illegible]

V. FEEDSTOCKS (See Appendix for CAS Numbers)

CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS			FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references e.g., state files, sample analysis, reports)



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A GROUNDWATER CONTAMINATION

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

Public water supply serves the area. Site next to the Mobile River. Groundwater close to the river contains high chlorides.

01 ☐ B SURFACE WATER CONTAMINATION

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

No reports after the incident was reported

01 ☐ C CONTAMINATION OF AIR

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

NONE

01 ☐ D FIRE/EXPLOSIVE CONDITIONS

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

NONE

01 ☐ E DIRECT CONTACT

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

NONE

01 ☐ F CONTAMINATION OF SOIL

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

03 AREA POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

NONE

01 ☐ G DRINKING WATER CONTAMINATION

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

NONE

01 ☐ H WORKER EXPOSURE/INJURY

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

03 WORKERS POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

NONE

01 ☐ I POPULATION EXPOSURE/INJURY

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

NONE



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

None

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (Include name(s) of species)

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

None

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

None

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES

(Spills/runoff/standing liquids/leaking drums)

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

None

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

None

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

None

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

SITE DISCOVERY FORM

Part 1: Information Necessary To Add A Site To CERCLIS

*ACTION: A

*EPA ID: ALD 98-175-4724

SITE NAME: Scott Paper Company Landfill Source: X (R = EPA, T = STATE)

STREET: P.O. Box 7447 Mobile AL 36688 CONGRESSIONAL DIST: 1

CITY: Mobile STATE: AL ZIP: 36688

COUNTY NAME: Mobile *COUNTY CODE: 097

LATITUDE: 88° 13' 20" LONGITUDE: 90° 44' 40"

*INVENTORY IND: Y REMEDIAL IND: Y REMOVAL IND: N FED FAC IND: N

RPM NAME: Betsy Shaver

RPM PHONE: 404-347-2234 (EPA Project Officer)

SITE DESCRIPTION:

Scott Paper Company's Mobile Mill site

(May contact Mr. F.M. Durrell at 432-0501)

Lat + Lon measured at site by EPA on 10/22/79

Landfill at end of Herbert Street.

Part 2: Other Site Information

DATE SITE REPORTED: 6/24/79 REPORTED BY: L. J. [unclear], ADEM
(Month) (Day) (Year)

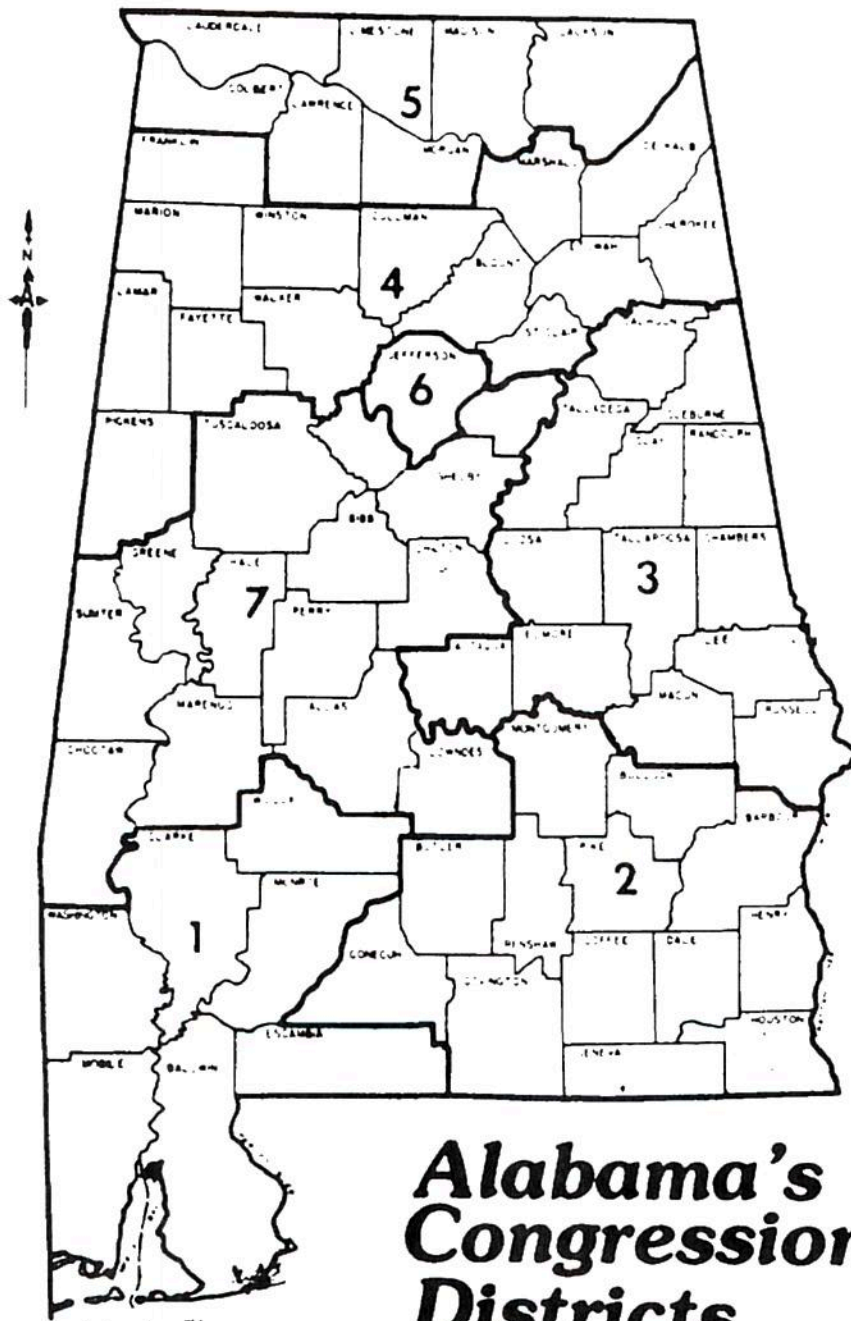
PHONE NUMBER OF REPORTER: 205- -

REASON FOR LISTING: 10,000 gallons Styrene Butadiene
(Dow 620 Latex) 200 gallons entered Chapman Creek
via 005 discharge point when a storage tank
Ruptured on Oct. 22, 1979. Clean up material
from ditch was taken to Scott's landfill at end of Herbert Street.

Staple copy of U.S.G.S. Quad Map section to this form and indicate site location, name of quad map used, and scale. Use a county highway map only if a U.S.G.S. map is not available.

*To be completed by EPA.

Return completed form to Steve Maurer, ADEM, Land Division



Alabama's Congressional Districts

SUGGESTED GUIDELINES FOR NAMING SITES

Select the name that most clearly identifies a site. For example, name the site after the responsible party, if definitely known. If there are several, try to establish a hierarchy on the basis of relative contribution to the problem. Avoid naming businesses that were not associated with the hazardous waste. For example: Jones Landfill/Smith Recycling/Brown Warehouse. If there are more than three, consider assigning a geographic name. For example: Highway 72 Disposal Area.

For large companies, identify the plant or facility. If the plant has a specific name use it. For example: Wod Chemical Co. (Leland Doan Plant). If the plant does not have a specific name, use the city name. For example: Wod Chemical Co. (Bay City Plant). If the company has more than one plant in a city, use something more specific such as street or area. For example: Wod Chemical Co. (Industrial Way Plant).

Use complete company names, including Co., Corp., and Inc. This helps distinguish between roadside or midnight dumps and established operations.

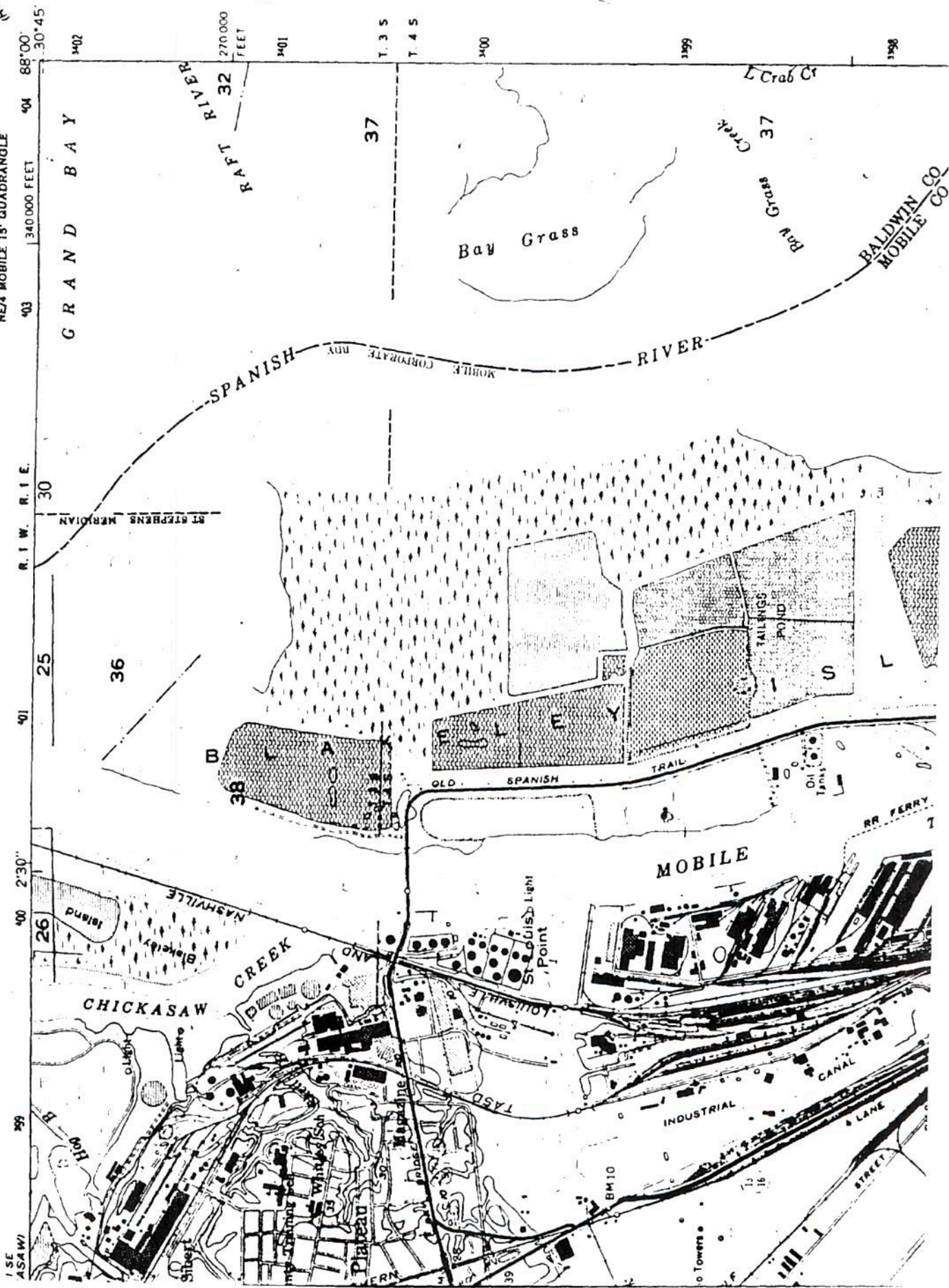
Use descriptive terms. Instead of "site," use some term, i.e., landfill, dump, pit, plant, industrial park, residential area, etc., that will suggest the nature of the site.

Avoid starting a name in such a way that it is hard to find. For example: Bedford Village Wells is preferable to Village of Bedford Wells. This is increasingly important for alphabetizing as the list gets longer.

Consult names of existing sites for guidance.

Make certain that the narrative summary explains the significance of the name.

MOBILE SUBDIVISION
ALABAMA
7.5 MINUTE SERIES (TOPOGRAPHIC)
NE 1/4 MOBILE 15' QUADRANGLE



MOBILE QUADRANGLE
ALABAMA
7.5 MINUTE SERIES (TOPOGRAPHIC)

NE/4 MOBILE 15' QUADRANGLE

3445 IV SW
(HURRICANE)

